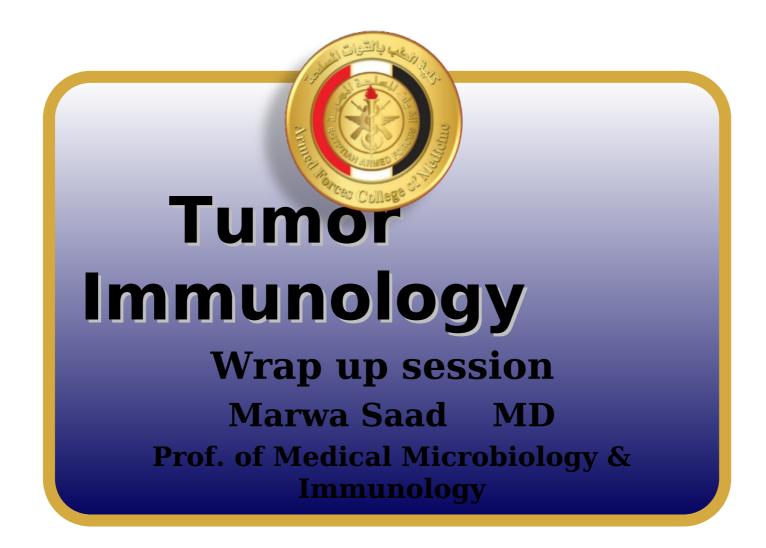


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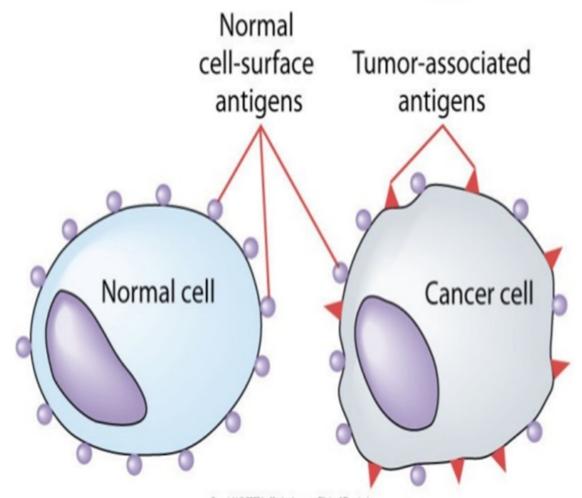
INTENDED LEARNING OBJECTIVES (ILO)

By the end of this session the student will be able to:

- 1. Define tumor antigens and outline examples
- 2. Outline immune surveillance theory
- 3. Mention the diagnostic and prognostic role of tumor markers .
- 4. Explain mechanisms by which tumors evade the immune response of the host
- 5. Identify the approaches for tumor immune therapy



How can tumor antigens be classified?



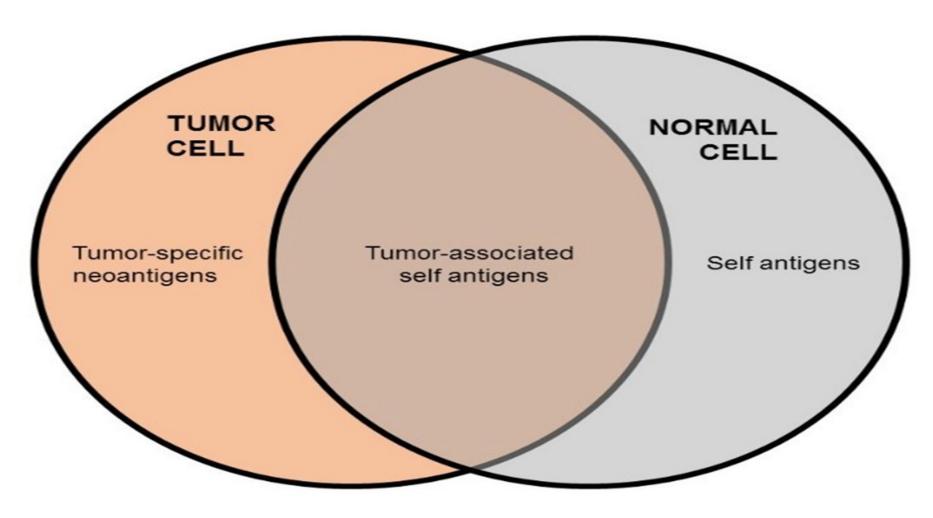
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- I. according to pattern of expression:
- A. Antigens that are expressed on tumor cells but not on normal cells are called tumor specific antigens; some of these antigens are unique to individual tumors, whereas others are shared among tumors of the same type.

B. Tumor antigens that are also expressed on normal cells are called tumor-associated antigens; in most cases, these antigens are normal cellular constituents whose expression is aberrant or dysregulated GIT Module- Medical Microbiology tumors.







II. According to molecular structure:

The modern classification of tumor antigens is based on the molecular structure and source of antigens expressed by tumor cells that stimulate T cell or antibody responses in their hosts.



t are the sources of tumor specific antigens?

A. Tumor specific Antigens

Protooncogene /Tumor supp

Protooncogene /Tumor suppressor gene EBV HHV8 HPV

Products of



B. Tumor non specific Antigens: Oncofetal antigens Genes encoding these proteins are:

Expressed during fetal life with malignant tumors

Silenced during development

Re-expressed

Antigens are present during normal fetal life, tumor cells but mot on mormal adult,

Carcinoemberyonic Ag (CEA) & Alpha fetoptn (



Carcinoembryonic antigen circulates at elevated levels in the serum of many patients with carcinoma of the colon, pancreas, breast, or liver. It is found in fetal gut, liver, and pancreas and in very small amounts in normal sera.

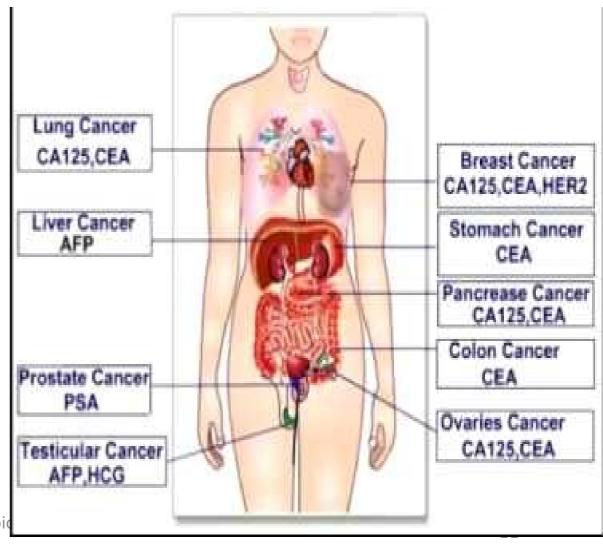
Alpha fetoprotein



✓ Alpha fetoprotein is present at elevated levels in the sera of hepatoma patients and is used as a marker for this disease.

It is produced by fetal liver and is found in small amounts in some normal sera.

It is nonspecific; it occurs in several other malignant and nonmalignant diseases.



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Which of the following describes the behavior of tumor non-specific antigens?
a.Encoding genes are silenced in fetal life b.Good prognostic management of the company of th

Immune Surveillance

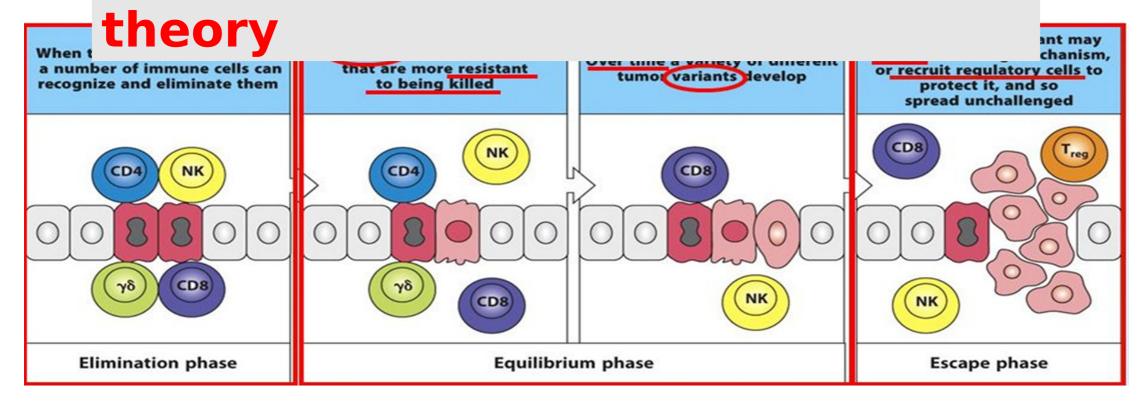


- Immune surveillance of cancer: a physiologic function of the immune system is to recognize and destroy clones of transformed cells before they grow into tumors and to kill tumors after they are formed.
- The existence of immune surveillance has been demonstrated by the increased incidence of some types of tumors in immunocompromised experimental animals and humans.





Describe the immune surveillance



Immune response against tumor cells



Both innate and adaptive immune responses can be detected in patients and experimental animals, and various immune mechanisms can kill tumor cells in vitro.

Antibody Cancer cell Natural killer cell

Macrophage

Helper T cell

Cytotoxic T cell

I.Innate IR:

A. Natural killer (NK)

cells, which act without Microbiology & Immunology 23-24

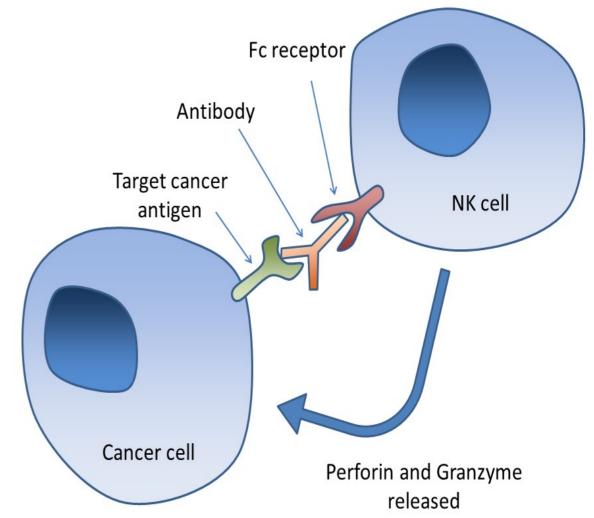
Immune response against tumor cells



II. Adaptive IR:

A.<u>Humoral: Antibodies</u>: Antibodies may kill tumor cells by:

- **√**activating complement
- ✓ antibody-dependent cell-mediated cytotoxicity (ADCC), in which Fc receptor-bearing NK cells mediate the killing.



Immune response against tumor cells



B. The cell-mediated immune responses that affect tumor cells in vitro include:

- 1. CD8 cytotoxic T lymphocyte
- 2. Activated macrophages: are capable of both inhibiting and promoting the growth and spread of cancers, depending on their activation state. Activation of macrophages by IFN-y-produced by years specific T colls.

Quiz: Immune Surveillance



- How can your immune system kill a tumor cell?
- a.Immunoglobulins
- b.T helper cells
- c.T regulatory cells
- d.NK cells
- e.Antibody dependent cell mediated cytot







Tumor Ags related nappropriate T cell stimulation mmune Suppression by tumo lost factors



I. Tumor Ag related

A. -Hidden tumor Ac factor B.

Gycocalyx mol.

Tumors in immune

secreted by tumors

Cover surface of tumor Ags

privileged sites:

Eye, brain, testicles

Grow without

IR

Non
cytotoxic Ab
bind t
mor
Ag

mask antigens
from cytotoxic T
Module- Medical Microbiology & Immunology
lymphocytes

C. Lost tumor Ags

Mutations or deletions in genes

encoding for tumor Ags

Tumors stop expressing Ags



II. Inappropriate T cell stimulation

EITHER: Rare expression of B7 molecules on most tumors

Poor co-stimulation of CTLs

OR

↓ MHC class I on most

tumor cells





irect Immune suppression by tumors

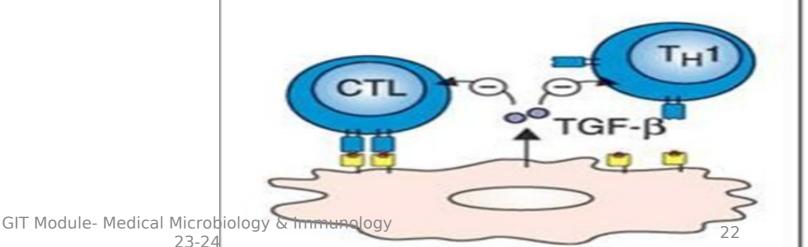
Secretion of TCFB &IL10
Induction of Treg cells

• MQ & lymphocytes

• T cell response to tumor Ags

Factors (e.g.,TGF-β) secreted by tumor cells inhibit T cells directly

Tumor-induced immune suppression





IV. Host related factors

↓immunity due to

Acquired Immune deficiency Syndrome (AIDS)

Treatment of autoimmu ne disease

Prevention of

graft rejection

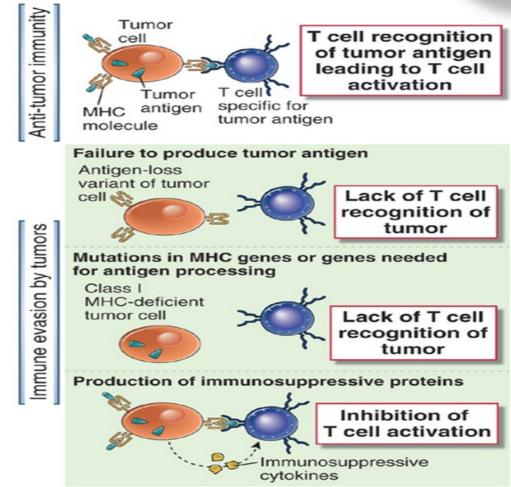
Extremes of age

Immatur
e or
exhaust
ed
Immune
system

To sum up!!!







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Explain methods of specific & Non specific immune stimulation in immune theory.

I. Non-specific stimulation of the immune system by the use of immunomodulators: either bacterial products e.g. BCG, or eukaryotic cell products e.g. thymic hormones and cytokines (IL-2 and IFNs).

II. Active Immunization:

A.Using vaccines prepared from treated tumor cells or purified tumor antigens after reduction of tumor mass by surgery or radiotherapy.



B. Immunization with DNA encoding foreign MHC Ags into the tumor leading to expression of alloantigen (foreign MHC) creating an immune response against both alloantigens and tumor antigens

- III. Passive Immunotherapy: A. Adoptive cellular immunotherapy:
- 1. The use of tumor-infiltrating lymphocytes (TIL): Some cancers are infiltrated by lymphocytes (NK cells and cytotoxic T cells) that seem likely to be trying to destroy the cancer cells.
- 2. Lymphocytes activated by interleukin-2 (lymphokine-activated killer [LAK] cells)



- **B.** Therapeutic monoclonal antibodies:
- 1. Monoclonal antibodies directed against CTLA-4 (inhibitor of costimulatory response) enhance the immune response against tumors
- 2. Monoclonal antibodies directed against new surface antigens on malignant cells (e.g., B-cell lymphomas) can be useful in diagnosis.



3. Monoclonal antibodies coupled to toxins, such as diphtheria toxin or ricin, a product of the Ricinus plant, can kill tumor cells in vitro and may be useful for cancer therapy prospectively.

IV. Genetic Manipulation of Tumor Cells:

By introduction of cytokine genes coding for IL-2, TNF, IFN-γ, GM-CSF or coding for costimulatory molecules e.g. B7.1 and B7.2.



Unleashing the power of the immune system to defeat cancer

Immunotherapy — a medical treatment that mobilizes the body's own natural defense system to fight diseases — is revolutionizing the way we treat cancer. There are several different immunotherapy approaches that treat a variety of cancers. Some are approved for use; others are being tested in clinical trials.

FIVE TYPES OF CANCER IMMUNOTHERAPY



Cellular therapy

The transfer of human cells to replace diseased cells with healthy, functional ones. Stem cell transplant and chimeric antigen receptor (CAR) T-cell therapy are examples of cellular therapies.



Immunomodulators

Medications that regulate and boost parts of the immune system. Checkpoint inhibitors and cytokines are immunomodulators.



Oncolytic virus therapy

Lab-modified viruses that infect and kill cancer cells without harming normal cells. Some of the viruses are found in nature, while others are modified in a lab.



Monoclonal antibodies

Man-made proteins that attack a specific part of a cancer cell. Some monoclonal antibodies are described as targeted therapies.



Cancer treatment vaccines

Medicines that train the Immune system to recognize and destroy cancer cells. Unlike cancer prevention vaccines, these are designed for people who already have cancer.

Quiz: Immune evasion by tumor cells



How can inappropriate T cell stimulation play a role in immune evasion by tumor cells?

- a.Rare expression of B7 molecules on most tumors
- **b.**Massive co-stimulation of CTLs
- c.Increased expression of MHC class I on most tumor cells
- d.Poor expression of MHC II on all tumor cells e.Masking antigens from cytotoxic T lymphocytes





- 1.Tumors develop new antigens on cells either specific or non specific
- 2.The immune system combat tumor via series of sequences summarized in the immune surveillance theory
- 3.Both humoral & cell mediated immune response are acting against tumors
- 4. Tumors exploit many mechanisms to escape the immune system armory
- 5.Immune therapy modalities are promising in tumor

Suggested Text Books



- 1. Review of Medical Microbiology and Immunology, Warren Levinson Chapter 68 p. 1236: 1249
- 2. Cellular and molecular Immunolgy, Abul Abbas & Lichtmann, 2015, Chapter 18 p.383:397

